



Receipt

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor : Ofer Shem Tov, et al.
Serial No : 09/778,467
Filed : February 7, 2001
Title : Personalized Visitor Pages
Group Art Unit : 2131

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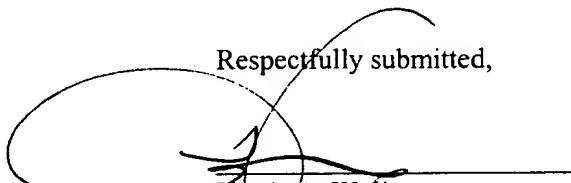
REQUEST FOR CORRECTED FILING RECEIPT

SIR:

We received the filing receipt on the above-referenced case, copy enclosed,
wherein the **APPLICANT RESIDENCE** was incorrectly listed as: **RAMAR GAN, ISRAEL**. Please
change the same to read: **RAMAT GAN, ISRAEL**.

Any fee, due as a result of this paper may be charged on Deposit Account No. 50-1290.

Respectfully submitted,


Harris A. Wolin
Reg. No. 39,432

Katten Muchin Zavis Rosenman
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Docket No.: VOCL 17.031 (100583-00083)
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/778,467	02/07/2001	2131	1146	VOCL 17.031	8	37	3

026304
ROSENMAN & COLIN LLP
575 MADISON AVENUE
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CONFIRMATION NO. 5909:
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Date Mailed: 04/03/2002

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Applicant(s)

Ofer Shem Tov, ~~Ramat Gan~~, ISRAEL;
Ariel Rabban, Livingston, NJ;
Gur Kimchi, New York, NY;
Omer Luzzatti, New York, NY;

RAMAT GAN

Domestic Priority data as claimed by applicant

Foreign Applications

If Required, Foreign Filing License Granted 03/10/2001

Projected Publication Date: 08/08/2002

Non-Publication Request: No

Early Publication Request: No

Title

Personalized visitor pages

Preliminary Class

455

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Bib Data Sheet

CONFIRMATION NO. 5909

SERIAL NUMBER 09/778,467	FILING DATE 02/07/2001 RULE	CLASS 455	GROUP ART UNIT 2131	ATTORNEY DOCKET NO. VOCL 17.031	
APPLICANTS Ofer Shem Tov, Ramat Gan, ISRAEL; Ariel Rabban, Livingston, NJ; Gur Kimchi, New York, NY; Omer Luzzatti, New York, NY; ** CONTINUING DATA ***** <i>None MRS</i> ** FOREIGN APPLICATIONS ***** <i>None MR</i>					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/10/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>M. Asadhyg MRS</i> Examiner's Signature Initials		STATE OR COUNTRY ISRAEL	SHEETS DRAWING 8	TOTAL CLAIMS 37	INDEPENDENT CLAIMS 3
ADDRESS 026304					
TITLE Personalized visitor pages					
FILING FEE RECEIVED 1146	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		